

PTO/SB/82 (04-05)

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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/848,833
Filing Date	05/01/2001
First Named Inventor	Barry Schwab
Art Unit	2132
Examiner Name	Unger, Daniel M.
Attorney Docket Number	600-003

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with
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OR

☒ Firm or
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Barry Schwab

Name

Barry Schwab

Date

6/23/2005

Telephone

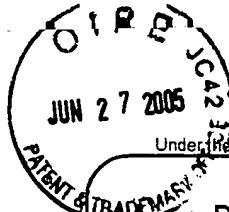
(248) 661-2717

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND PERS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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INDICATION FORM**

Application Number	09/846,933
Filing Date	05/01/2001
First Named Inventor	Barry H. Schwab
Title	SECURE INTERACTIVE DIGITAL SYSTEM FOR DISPLAYING ITEMS TO A USER IDENTIFIED AS HAVING PERMISSION TO ACCESS THE SYSTEM
Art Unit	2131
Examiner Name	Not Known /Unassigned
Attorney Docket Number	

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
John G. Chupa	33,483

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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<input checked="" type="checkbox"/> Firm or Individual Name	Law Office of John Chupa & Associates, P.C.				
Address	28535 Orchard Lake Rd., Ste. 50				
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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Barry H. Schwab		
Signature			
Date	05/07/2004	Telephone	(248) 324-7787

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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